

PTO/SB/82 (01-06)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/791,980
Filing Date	March 3, 2004
First Named Inventor	Timothy Wood
Art Unit	1656
Examiner Name	Sheridan L. Swope
Attorney Docket Number	PHRM0019-101 (00041REGUS)

I hereby revoke all previous powers of attorney given in the above-identified application.☐ A Power of Attorney is submitted herewith.**OR**☒ I hereby appoint the practitioners associated with the Customer Number:

23913

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:

23913

OR

<input type="checkbox"/> Firm or Individual Name					
Address					
City		State		Zip	
Country					
Telephone			Email		

I am the:☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Grover F. Fuller Jr., Reg. No. 31,760, In His Capacity As (See Below)		
Date	JANUARY 26, 2006	Telephone	(212) 573-1390

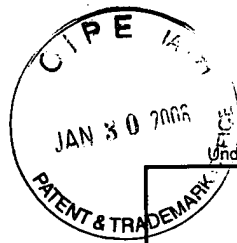
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Assistant Secretary of Pharmacia & Upjohn Company LLC
(Formerly known as Pharmacia & Upjohn Company)



STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Timothy Wood, Jonas Ekblom, Erik Holmgren, Mats Kihlen

Application No./Patent No./Control No.: 10/791,980 Filed/Issue Date: March 3, 2004

Entitled: A MATRIX METALLOPROTEINASE POLYPEPTIDE

Pharmacia & Upjohn Company, a Corporation
(Name of Assignee) (Type of Assignee: corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest
(The extent (by percentage) of its ownership interest is _____ %)

in the patent application/patent identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 015048, Frame 0180, or a true copy of the original assignment is attached. (Copy also attached)

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Grover F. Fuller Jr.
Signature

January 26, 2004
Date

Grover F. Fuller Jr., Reg. No. 31,760

(212) 573-1390

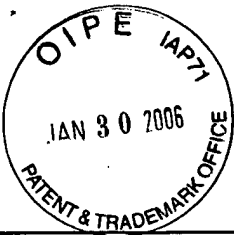
Printed or Typed Name

Telephone Number

Assistant Secretary of Pharmacia & Upjohn Company LLC (Formerly known as Pharmacia & Upjohn Company)
Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Pharm0019-101
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MD/GJA

UNITED STATES PATENT AND TRADEMARK OFFICE

UNDER SECRETARY OF COMMERCE FOR INTELLECTUAL PROPERTY AND
DIRECTOR OF THE UNITED STATES PATENT AND TRADEMARK OFFICE

AUGUST 28, 2004

PTAS



102691047A

COZEN O'CONNOR
GWILYM J.O. ATTWELL
1900 MARKET STREET
PHILADELPHOA, PA 19103

UNITED STATES PATENT AND TRADEMARK OFFICE
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PLEASE REVIEW ALL INFORMATION CONTAINED ON THIS NOTICE. THE INFORMATION CONTAINED ON THIS RECORDATION NOTICE REFLECTS THE DATA PRESENT IN THE PATENT AND TRADEMARK ASSIGNMENT SYSTEM. IF YOU SHOULD FIND ANY ERRORS OR HAVE QUESTIONS CONCERNING THIS NOTICE, YOU MAY CONTACT THE EMPLOYEE WHOSE NAME APPEARS ON THIS NOTICE AT 703-308-9723. PLEASE SEND REQUEST FOR CORRECTION TO: U.S. PATENT AND TRADEMARK OFFICE, ASSIGNMENT DIVISION, BOX ASSIGNMENTS, CG-4, 1213 JEFFERSON DAVIS HWY, SUITE 320, WASHINGTON, D.C. 20231.

RECORDATION DATE: 03/03/2004

REEL/FRAME: 015048/0180

NUMBER OF PAGES: 4

BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:

WOOD, TIMOTHY

DOC DATE: 11/13/2001

ASSIGNOR:

EKBLOM, JONAS

DOC DATE: 11/13/2001

ASSIGNOR:

HOLMGREN, ERIK

DOC DATE: 11/13/2001

ASSIGNOR:

KIHLEN, MATS

DOC DATE: 11/13/2001

ASSIGNEE:

PHARMACIA & UPJOHN COMPANY
301 HENRIETTA STREET
KALAMAZOO, MICHIGAN 49007

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COZEN IP DEPT.

SEP 03 2004

DUE DATE N/A
MAX DATE
DOCKETED BY YM

015048/0180 PAGE 2

SERIAL NUMBER: 10791980

FILING DATE: 03/03/2004

PATENT NUMBER:

ISSUE DATE:

TITLE: NOVEL MATRIX METALLOPROTEINASES

DIANE RUSSELE, PARALEGAL
ASSIGNMENT DIVISION
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RECORDED

03-11-2004

U.S. DEPARTMENT OF COMMERCE
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To the Honorable Commissioner of Patents

102691047

1. Name of conveying party(ies):

Timothy Wood
Jonas Ekblom
Erik Holmgren
Mats Kihlén

Additional name of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance:

- ☒ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
☐ Other

Execution Date: 11/13/2001; 11/13/2001; 11/13/2001; and 11/13/2001

2. Name and address of receiving party(ies)

Name: Pharmacia & Upjohn Company

Internal Address: _____

Street Address: 301 Henrietta Street

City: Kalamazoo State: MI Zip: 49007

Additional Name(s) & address(es) attached? ☐ Yes ☐ No

10791980

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is:

DIVISIONAL APPLICATION BEING FILED CONCURRENTLY HEREWITH

A. Patent Application No.(s)

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☐ No

5. Name and address of party to whom correspondence concerning this document should be mailed:

Name: Gwilym J.O. Attwell

Internal Address: _____

Street Address: Cozen O'Connor

1900 Market Street

City: Philadelphia State: PA Zip: 19103

6. Total number of applications and patents involved: 1

7. Total fee (37 CFR 3.41) \$ 40.00

- ☐ Enclosed
☒ Authorized to be charged to deposit account

8. Deposit account number:

50-1275

(Attach duplicate copy of this page if paying by deposit account)

03/10/2004 6TON11 00000060 501275 10791980

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9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Gwilym J.O. Attwell

Name of Person Signing

[Signature]
Signature

March 3, 2004

Date

Total number of pages including cover sheet, attachments, and documents: 4

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
Washington, D.C. 20231

ASSIGNMENT

Title: NOVEL MATRIC METALLOPROTEINASES

Inventors: Timothy Wood, Jonas Ekblom, Erik Holmgren and Mats Kihén

Serial No.: 09/862.631

Filing Date: May 21, 2001

Docket No.: 00014regUS

Country: USA

Execution Date of Application:

As a below-named inventor, I hereby declare that:

My post office address is as stated below under my signature and I am named as inventor of the inventions or discoveries (herein INVENTIONS) as described in the patent application (herein APPLICATION) identified above. In view of valuable consideration, receipt thereof is hereby acknowledged, I do hereby assign and transfer unto PHARMACIA & UPJOHN COMPANY, a corporation of the State of Delaware having a place of business at Kalamazoo, Michigan, its successors and assigns, my entire interest in and the full and exclusive right to the INVENTIONS, the APPLICATION and all related applications (including all divisions, reissues, continuations, and extensions thereof) and all counterparts in other countries, and any and all Letters Patent (and certificates of invention or similar certificates) (herein PATENTS) which may be granted based upon the INVENTIONS or the APPLICATION or related applications or counterparts in other countries; said transfer and assignment being applicable throughout the world. I hereby authorize and request officials of patent offices in any and all countries of the world to issue any and all of the PATENTS, when granted, to PHARMACIA & UPJOHN COMPANY, its successors and assigns, as the assignee of my entire right, title, and interest in and to the same. I agree that I will communicate to PHARMACIA & UPJOHN COMPANY, or its representatives, any facts known to me respecting the invention; testify in any legal proceedings; sign all lawful papers; execute all divisional, continuation, substitution, renewal, and reissue applications; execute all necessary assignment papers to cause any and all of the PATENTS to be issued to PHARMACIA & UPJOHN COMPANY; make all rightful oaths; and generally do everything possible to aid PHARMACIA & UPJOHN COMPANY, its successors and assigns, to obtain and enforce proper protection for the INVENTION in any and all countries throughout the world.

FULL NAME OF FIRST/SOLE INVENTOR: Timothy Wood

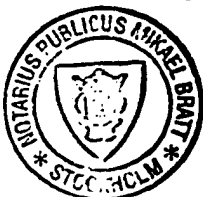
Signature of Inventor: T W U J

Address: ~~Sögsstigen 11~~ Skogsstigen 11
~~SE-131 42 NACKA~~ SE-131 42 NACKA TW

COUNTRY OF SWEDEN

On the 13th of November, 2001, the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free act and deed in and for the purposes set forth in said instrument.

SEAL



[Signature]
Notary Public

FULL NAME OF SECOND/JOINT INVENTOR: Jonas Ekblom

Signature of Inventor: _____

Address: Karlsgatan 93B
SE-752 39 Uppsala

COUNTRY OF SWEDEN

On the 13th of November, 2001, the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free act and deed in and for the purposes set forth in said instrument.

SEAL



Notary Public

FULL NAME OF THIRD/JOINT INVENTOR: Erik Holmgren

Signature of Inventor: _____

Address: Lojovagen 3
SE-181 41 Lidingö

COUNTRY OF SWEDEN

On the 13th of November, 2001, the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free act and deed in and for the purposes set forth in said instrument.

SEAL



Notary Public



FULL NAME OF FOURTH/JOINT INVENTOR: Mats Kihlén

Signature of Inventor: 

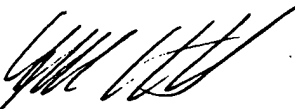
Address: Lastmakargatan 8B
SE-754 34 Uppsala

COUNTRY OF SWEDEN

On the 13th of November, 2001, the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free act and deed in and for the purposes set forth in said instrument.

SEAL




Notary Public

FULL NAME OF FIFTH/JOINT INVENTOR:

Signature of Inventor: _____

Address:

STATE OF MICHIGAN
COUNTY OF KALAMAZOO

On _____, the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free act and deed in and for the purposes set forth in said instrument.

SEAL

Notary Public